## Texas Department of Criminal Justice Standard or Supplemental Safe Prisons/PREA Training Contract Employee Acknowledgement Form FY2015

Contract Employee Month/Da	ny of Birth:mm/dd	Unit/Departn	nent:
Contract Employee Name:			
(Please Print)	Last	First	MI
Contact Employee SSN:			
I hereby acknowledge that or Prisons/PREA Training prove <i>Prisons/PREA in Texas</i> . I for disclose if I:	ided by the TDCJ, whi	ich included viewing ti	he training video <i>Safe</i>
<ol> <li>Engaged in sexual about juvenile facility, or ot</li> </ol>		ckup, community conf	inement facility,
	ctivity in the communi		overt or implied threats
I have ☐ I have not ☐ e	ngaged in any of the a	ctions described in ite	ms 1 or 2 of this form.
My signature on this form ce	rtifies that I understand	d the training and info	rmation I have received.
Contract Employee's Signa	fura	Date (mm/do	d/www)

Note to Contract Employee: With few exceptions, you are entitled upon request: (1) to be informed about the information the TDCJ collects about you; and (2) under Texas Government Code § \$ 552.021 and 552.023, to receive and review the collected information. Under Texas Government Code § 559.004, you are also entitled to request, in accordance with the TDCJ's procedures, that incorrect information the TDCJ has collected about you be corrected.